efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491074006101

2020

OMB No. 1545-0052

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

or	cale	ndar year 2020, or tax year beginning 01-01-20)20 , a	nd ending 12-31	-2020		
		indation BUCK FAMILY FOUNDATION INC		A Employer id	lentification numbe	er	
DP	(VID W	BUCK FAMILY FOUNDATION INC		52-2275104			
		I street (or P.O. box number if mail is not delivered to street address)	Room/suite	R Telephone n	ımher /see instructio	ne)	
16	5428 YE	EOHO ROAD	(410) 472-404	B Telephone number (see instructions)			
Sity or town, state or province, country, and ZIP or foreign postal code							
SPAF	RKS, MI	21152		C If exemption	application is pendin	ng, check here	
i Ch	neck al	l that apply: Initial return Initial return of a	former public charity	D 1. Foreign or	ganizations, check h	ere	
		Final return Amended return		2. Foreign o	rganizations meeting		
		Address change Name change		test, che	ck here and attach co	mputation 🕨 🔛	
I Ch	neck ty	rpe of organization: Section 501(c)(3) exempt private	foundation		undation status was on 507(b)(1)(A), chec		
	Section	1 4947(a)(1) nonexempt charitable trust	e private foundation		00, (2)(1)(1,1), 0.101		
		xet value of all assets at end J Accounting method:	☑ Cash ☐ Accru		ation is in a 60-mont		
		rom Part II, col. (c), ▶\$ 561,095 ☐ Other (specify)		under section	on 507(b)(1)(B), chec	ck here 🕨 🗀	
	/	(Part I, column (d) must	be on cash basis.)				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	a		(d) Disbursements	
		of amounts in columns (b), (c), and (d) may not necessarily	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes	
	ı	equal the amounts in column (a) (see instructions).)	DOOKS			(cash basis only)	
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check ► ✓ if the foundation is not required to attach					
	_	Sch. B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	6,917	6,917	'		
	5a	Gross rents					
a)	b	Net rental income or (loss)					
Ĕ	6a	Net gain or (loss) from sale of assets not on line 10	61,435				
Revenue	b	Gross sales price for all assets on line 6a 95,639		02.245			
ã	7	Capital gain net income (from Part IV, line 2)		92,313	3		
	8	Net short-term capital gain					
	10a	Gross sales less returns and allowances					
	ь	Less: Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	68,352	99,230)		
	13	Compensation of officers, directors, trustees, etc.	,	,		C	
	14	Other employee salaries and wages					
Ņ	15	Pension plans, employee benefits					
156	16a	Legal fees (attach schedule)					
Expenses	ь	Accounting fees (attach schedule)	1,030	515	;	515	
	С	Other professional fees (attach schedule)	_				
il e	17	Interest					
and Administrative	18	Taxes (attach schedule) (see instructions)	1,452	2 (C	
Ê	19	Depreciation (attach schedule) and depletion					
	20	Occupancy					
Ĭ	21	Travel, conferences, and meetings					
	22	Printing and publications					
	23	Other expenses (attach schedule)					
= ====================================	24	Total operating and administrative expenses.					
Operating		Add lines 13 through 23	2,482	515	; <u> </u>	515	
)	25	Contributions, gifts, grants paid	80,000			80,000	
	26	Total expenses and disbursements. Add lines 24 and					
	27	25	82,482	515	5	80,515	
	27	Subtract line 26 from line 12: Excess of revenue over expenses and					
	a	disbursements	-14,130				
	b	Net investment income (if negative, enter -0-)		98,715	5		
	С	Adjusted net income (if negative, enter -0-)					
	D	work Daduation Ast Nation and instructions		O I NI 41000	_	000 DE (0000)	

Attached schedules and amounts in the description column

Beginning of year

214,084

214,084

214,084

214,084

199.954

199,954

199,954

199,954

1

2

3

4

5

214,084

-14,130

199,954

199,954 Form **990-PF** (2020)

0

0

Page 2

561.095

End of year

	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			_
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts ▶			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₹	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	210,342	176,137	537,278
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			_
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			

Land, buildings, and equipment: basis ▶

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Foundations that follow FASB ASC 958, check here ▶

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg., and equipment fund

Less: accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Other assets (describe

Other liabilities (describe -_

Grants payable

instructions. Also, see page 1, item I)

Accounts payable and accrued expenses .

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions .

Net assets with donor restrictions . .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Form 990-PF (2020)

14

15

16

17

18

19

20

21

22 23

24

25

26

27 28

29

30

Part III

2

3

4

Liabilities

Net Assets or Fund Balances

Page **3**

		ind(s) of property sold (e.g., ee; or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1 a 5	525 SHARES OF MICROSOFT CO	ORP (MFST)			2010-01-01	2020-08-31
b						
с						
d						
e						
	(e) (f) Gross sales price (or allowable)		Cost or	(g) other basis ense of sale	Gain c	h) ır (loss)) minus (g)
a	95,639			3,326	5	92,313
b						
с						
d						
e						
	Complete only for assets showi		ned by the foundation	on 12/31/69		1)
	(i)	(j) Adjusted basis		(k) s of col. (i)		h) gain minus less than -0-) or
	F.M.V. as of 12/31/69	as of 12/31/69	over co	l. (j), if any	Losses (fr	om col.(h))
a						92,313
b						
c						
d						
e						
3	Capital gain net income or (ne Net short-term capital gain or If gain, also enter in Part I, lin in Part I, line 8	(loss) as defined in sections : e 8, column (c) (see instructi	ons). If (loss), enter -0	Part I, line 7 }	3	92,313
Part	_	Section 4940(e) for Re			come	
	ON 4940(e) REPEALED (Reserved	ON DECEMBER 20, 2019	- DO NOT COMPL	EIE		
	(a)	(b)	(c)	I	(d)	
	Reserved	Reserved	Reserved		Reserved	
					1	
	Reserved			<u> </u>		
3 Reserved				3	<u> </u>	
4 Reserved				4	<u> </u>	
5 Reserved				5		
6 R	teserved			6		
7 R	Reserved			7]	
8 R	Reserved ,			8]	
	•					
					E,	rm QQN-PF (2020)

							<u>'</u>	age v
Par		ling Activities for Which	Form 4720 May Be	Required (continued	1)			
ia	During the year did the foundation						Yes	No
	(1) Carry on propaganda, or otherv	vise attempt to influence legisl	ation (section 4945(e))?	Yes	✓ No	,		
	(2) Influence the outcome of any s	pecific public election (see sec	tion 4955); or to carry					
	on, directly or indirectly, any vo	ter registration drive?		· · · Yes	✓ No	,		
	(3) Provide a grant to an individual	for travel, study, or other sim	ilar purposes?		✓ No			
	(4) Provide a grant to an organization	ion other than a charitable, etc	c., organization described					
	in section 4945(d)(4)(A)? See i	nstructions		· · 🗌 Yes	✓ No	,		
	(5) Provide for any purpose other t	han religious, charitable, scien	tific, literary, or					
	educational purposes, or for the	prevention of cruelty to child	ren or animals?	· ·	✓ N			
b	If any answer is "Yes" to $5a(1)-(5)$,	did any of the transactions fa	ail to qualify under the ex	ceptions described in		´		
	Regulations section 53.4945 or in a	current notice regarding disas	ter assistance? See instr	ructions		5b		
	Organizations relying on a current r	otice regarding disaster assist	ance check here					
C	If the answer is "Yes" to question 5	a(4), does the foundation clair	n exemption from the					
	tax because it maintained expenditu	ure responsibility for the grant	?	· · 🔲 Yes	□ No			
	If "Yes," attach the statement requi	red by Regulations section 53.	4945-5(d).	□ 1es		'		
a	Did the foundation, during the year,	, receive any funds, directly or	indirectly, to pay premi	ums on				
b	Did the foundation, during the year,	, pay premiums, directly or inc	lirectly, on a personal be		. ✓ No	6b		No
	If "Yes" to 6b, file Form 8870.	, , ,	,, 1					
'a	At any time during the tax year, wa	s the foundation a party to a r	prohibited tax shelter tra	nsaction?				
	If "Yes", did the foundation receive			∟ res	✓ No	7b		
	Is the foundation subject to the sec				•	1.5		
	excess parachute payment during the	, , , ,						
		<u> </u>			✓ No		<u> </u>	<u> </u>
Par	and Contractors	Officers, Directors, Trust	tees, Foundation Ma	anagers, Hignly Paid	I Emp	ioyees,		
1	List all officers, directors, truste							
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans		e) Expen		
	. ,	devoted to position	· -0-)	deferred compensatio		other al	llowand	ces
ee A	Additional Data Table							
]						
		1						
		1						
		1						
2	Compensation of five highest-pa	id employees (other than t	hose included on line :	1—see instructions). If	none,	enter "	NONE	."
				(d) Contributions to				
a) [Name and address of each employee	paid (b) Title, and average hours per week	(c) Compensation	employee benefit) Expens		
	more than \$50,000	devoted to position	(c) compensation	plans and deferred compensation		other all	owanc	es
ONE	=			Compensation				
ONE	=							
ota	I number of other employees paid ov	er \$50,000 						- (
						orm 99 0	N-DE	(2020

Form 990-PF (2020)	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NO	ONE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
-	
All other program-related investments. See instructions.	
3	4
	\dashv
Total. Add lines 1 through 3	0
	5 000 PE (2020)

Page 8

26,659

1,372

25,287

25.287

25.287

80,515

80.515

80.515

Form 990-PF (2020)

Form 990-PF (2020)

1

2a

3

4

5

6

1

2

3

4

5

b

Part XII

3	Subtract line 2 from line 1d	3	541,298
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	8,119
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	533,179
6	Minimum investment return. Enter 5% of line 5	6	26,659
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at XI	nd cer	tain foreign
Pal	organizations check here and do not complete this part.)		

2a |

2b

1.372

2c

3

4

5

6

7

1a

1b

2

За 3h

4

5

Distributable amount before adjustments. Subtract line 2c from line 1.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Tax on investment income for 2020 from Part VI, line 5.

Income tax for 2020. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

a From 2015.

b From 2016. c From 2017. . .

d From 2018.

e From 2019.

25,287

25,287

Form **990-PF** (2020)

Page 9

Form	990-P	F (20
Pa	rt XI	11

9	0-	Ρ	F	(2	0	2	0)
					_			_

·PF (20	020)		
Ш	Undistributed Income (see instruc	tions)	
	_	(a)

al C VIII	Olidistributed Income (see mistrat	_
		T
		ı
		Ļ
Distributable	e amount for 2020 from Part XI, line 7	١

Undistributed income, if any, as of the end of 2020: a Enter amount for 2019 only. Excess distributions carryover, if any, to 2020:

f Total of lines 3a through e.

d Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2015 not

applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2021.

10 Analysis of line 9: a Excess from 2016. .

b Excess from 2017. .

c Excess from 2018. .

d Excess from 2019. .

e Excess from 2020. .

Subtract lines 7 and 8 from line 6a

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ a Applied to 2019, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

201.469

55.228

256,697

24.581

232,116

Corpus

24.581 31,812

44 287

48.684 52,105

31.812 44,287

48.684

52.105

55.228

(b)

Years prior to 2019

(c)

2019

(4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in

assets at any time during the year—see instructions.)

Information Regarding Foundation Managers:

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation

before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

b The form in which applications should be submitted and information and materials they should include:

Check here ▶ 🔲 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

AWARDS ARE INTENDED FOR THE BENEFIT OF EDUCATION, ARTS AND SCIENCES IN THE STATE OF MARYLAND.

Form 990-PF (2020)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the

JUDITH B RUSINS DAVID W BUCK FAMILY

16428 YEOHO ROAD SPARKS, MD 21152 (410) 472-0055

c Any submission deadlines:

factors:

2

ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

other conditions, complete items 2a, b, c, and d. See instructions

LETTER DESCRIBING PROGRAM AND INTENDED USE OF FUNDS.

Form 990-PF (2020)				Page 11
Part XV Supplementary Informa	ation (continued)			
3 Grants and Contributions Paid	d During the Year or Appro	oved for Future	e Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year See Additional Data Table				
Total	 	<u> </u>	▶ 3a	80,000
b Approved for future payment				
		 		
Total			▶ 3b	0

Form **990-PF** (2020)

nter gross	amounts unless otherwise indicated.	Unrelated business income		Excluded by section	(e) Related or exempl	
1 Progran	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.
	and contracts from government agencies					
_	rship dues and assessments					
3 Interes	t on savings and temporary cash					
investn						
	ds and interest from securities			14	6,917	
	tal income or (loss) from real estate:					
	financed property ebt-financed property					
	tal income or (loss) from personal property					
	nvestment income.					
	(loss) from sales of assets other than					
invento				18	61,435	
Net inc	ome or (loss) from special events:				,	
O Gross	profit or (loss) from sales of inventory					
1 Other i	evenue: a					
b						
C						
`						
d						
d e						
d e 2 Subtot	al. Add columns (b), (d), and (e).		0		68,352	
d e 2 Subtot 3 Total. (See wo		lations.)		1	68,352 3	
d e 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
d e 2 Subtot 3 Total. (See wo Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
d e 2 Subtot 3 Total. (See wo Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
d e 2 Subtot 3 Total. (See wo Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
d e 2 Subtot 3 Total. (See wo Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
d e 2 Subtot 3 Total. (See wo Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
d e 2 Subtot 3 Total. (See wo Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
d e 2 Subtot 3 Total. (See wo Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	
de 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) ne Accomplish income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	68,352

Part XVII	Information Regarding T Exempt Organizations	ransfers	s To and 1	Fransacti	ons and	Relations	hips V	Vith N	Ioncharit	able	
B: Lul	1 11 11 11 11 11 11 11 11 11 11 11 11 1		6.1 6.11								-

		Exempt Organi	zations									
1	Did the o	rganization directly or ir r than section 501(c)(3)	ndirectly enga organization	age in s) or i	any of the	following with 527, relating to	any poli	other organization	on described in sections?	n 501	Yes	No
а	Transfers	from the reporting four	ndation to a n	oncha	ritable ex	empt organizat	ion c	of:				
	(1) Cas	h								. 1a(1)		No
	(2) Oth	er assets								. 1a(2)		No
b	Other tra	nsactions:										
		es of assets to a nonchar	•	_						. 1b(1)		No
	(2) Pure	chases of assets from a i	noncharitable	exem	npt organiz	zation				. 1 b(2)		No
	(3) Ren	tal of facilities, equipme	nt, or other a	ssets.						. 1b(3)		No
	(4) Rein	nbursement arrangemer	nts							. 1b(4)		No
	(5) Loai	ns or loan guarantees.								. 1b(5)		No
	(6) Perfo	ormance of services or m	nembership o	r fund	raising sol	licitations				. 1b(6)		No
С	Sharing of	of facilities, equipment, r	mailing lists,	other .	assets, or	paid employee	s.			. 1c		No
	of the go in any tra	swer to any of the above ods, other assets, or ser ansaction or sharing arra	vices given b ingement, sh	y the low in	reporting column (c	foundation. If t	the fo	oundation receive goods, other asse	ed less than fair mark ets, or services receiv	et value ed.		
(a)	Line No.	(b) Amount involved	(c) Name of	noncha	aritable exe	mpt organization		(d) Description of	transfers, transactions,	and sharing arra	ngemen	its
							_					
							+					
	+						+					
	-		-				+					
							+					
							+					
							+					
							+					
							1					
2a	Is the fo	undation directly or indir	ectly affiliate	d with	, or relate	d to, one or mo	ore ta	ax-exempt organ	izations			
	described	d in section 501(c) (othe	r than section	n 501((c)(3)) or i	in section 527?			🗆 Ye	s 🔽 No		
b	If "Yes,"	complete the following s	chedule.									
		(a) Name of organization	on		(1	b) Type of organiz	zation	1	(c) Description	of relationship		
c:	of wh	der penalties of perjury, my knowledge and belie ich preparer has any kno	f, it is true, c							sed on all info	rmatior	n of
	gn	*****				2021-03-01		*****		May the IRS d return	iscuss th	nis
П	ere									with the prepa	rer shov	vn
		Signature of officer or t	rustee			Date		Title		below (see instr.)	7 r	٦
										(see instr.)	∐ Yes ∟	J No
		Print/Type preparer's	s name	Prep	arer's Sigr	nature		Date	_P	TIN		
									Check if self-	P0036	5380	
		AMANDA W WILHE	=I M					2021-02-04	employed ▶ 📙	F0036	,,,,,,,	
Pā	nid	AMANDA W WIEN						2021-03-01				
Pr	epare	r Firm's name ► SC&	H FINANCIAL	_ AD\/I	SORS INC				1			
	e Onl					- 			F	irm's EIN ▶52	-21372	226
			LO RIDGEBRO	OK R	OAD							
		C.	DADKE WU .	21152					P	hone no. (410) 403-:	1500
		31	PARKS, MD 2	21132						•		

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, Contributions to (e) other allowances hours per week not paid, enter (h) devoted to position -0-1 employee henefit plans

	(b) develou to position	,	and deferred compensation	
JUDITH B RUSINS	PRESIDENT	0	0	

16428 YEOHO ROAD SPARKS, MD 21152	PRESIDENT 1.00	0	0	0
ELIZABETH M BUCK	VICE-PRESIDENT	0	0	0

ELIZABETH M BUCK	VICE-PRESIDENT	0	0	0
106 ENGLISH RUN CIRCLE SPARKS, MD 21152	1.00			
ELIZABETH M BUCK	SECRETARY	0	0	0

106 ENGLISH RUN CIRCLE SPARKS, MD 21152	1.00			
ELIZABETH M BUCK	SECRETARY	0	0	0
106 ENGLISH RUN CIRCLE SPARKS, MD 21152	1.00			

ELIZABETH M BUCK	SECRETARY	0	0	0
106 ENGLISH RUN CIRCLE SPARKS, MD 21152	1.00			
ELIZABETH M BUCK	TREASURER	0	0	0

SPARKS, MD 21152				
ELIZABETH M BUCK	TREASURER	0	0	0
106 ENGLISH RUN CIRCLE	1.00			

ELIZABETH M BUCK	TREASURER	0	0	0
106 ENGLISH RUN CIRCLE SPARKS, MD 21152	1.00			
·			•	

106 ENGLISH RUN CIRCLE SPARKS, MD 21152	1.00		
LARS RUSINS	DIRECTOR	0	

1.00

16428 YEOHO ROAD SPARKS, MD 21152

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ALZHEIMER'S ASSOCIATION - GREATER NONE PC GENERAL SUPPORT 500 MD CHAPTER

PO BOX 96011 WASHINGTON, DC 200906011				
AMERICAN CANCER SOCIETY PO BOX 22478 OKLAHOMA CITY, OK 73123	NONE	PC	GENERAL SUPPORT	1,000
AMERICARES - WORLDWIDE DISASTER RELIEF FUND 88 HAMILTON AVENUE STAMFORD, CT 06902	NONE	PC	GENERAL SUPPORT	10,000

Total .

За

80,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
ASTHMA AND ALLERGY FOUNDATION OF AMERICA	NONE	PC	GENERAL SUPPORT	500

1235 S CLARK ST STE 305 ARLINGTON, VA 22202				
BABE RUTH MUSEUM216 EMORY ROAD BALTIMORE, MD 21230	NONE	PC	GENERAL SUPPORT	

Total .

BABE RUTH MUSEUM216 EMORY ROAD BALTIMORE, MD 21230	NONE	PC	GENERAL SUPPORT	500
BALTIMORE & OHIO RAILROAD MUSEUM 901 W PRATT STREET	NONE	PC	GENERAL SUPPORT	500

BALTIMORE, MD 21230				
BALTIMORE & OHIO RAILROAD MUSEUM 901 W PRATT STREET BALTIMORE, MD 21223	NONE	PC	GENERAL SUPPORT	500

BALTIMORE & OHIO RAILROAD MUSEUM 901 W PRATT STREET	NONE	PC	GENERAL SUPPORT	500
BALTIMORE, MD 21223				

80,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

	or substantial contributor			
a Paid during the year				
BALTIMORE MUSEUM OF ART	NONE	PC	GENERAL SUPPORT	

500

500

80,000

▶ 3a

10 ART MUSEUM DRIVE BALTIMORE, MD 21218	NONE	PC	GENERAL SUPPORT	
BALTIMORE SYMPHONY ORCHESTRA	NONE	PC	GENERAL SUPPORT	

BALTIMORE SYMPHONY ORCHESTRA 1212 CATHEDRAL STREET BALTIMORE, MD 21201	NONE	PC	GENERAL SUPPORT	!
BLITLED VOLUNTEED EIDE COMPANY	NONE	DC.	CENERAL SURBORT	1 (

BALTIMORE, MD 21201				
BUTLER VOLUNTEER FIRE COMPANY PO BOX 75	NONE	PC	GENERAL SUPPORT	1,000
BUTLER MD 21023				

BALTIMORE, MD 21201				
BUTLER VOLUNTEER FIRE COMPANY PO BOX 75 BUTLER, MD 21023	NONE	PC	GENERAL SUPPORT	1,0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

5 /				
CALM ACRES - COMMUNITY FOUNDATION OF CARROLL COUNTY 3000 ROHRBAUGH ROAD HAMPSTEAD, MD 21074	NONE	PC	GENERAL SUPPORT	500
CANTINE COMPANIONS FOR	NONE	امرا	CENERAL CURRORT	F00

3000 ROHRBAUGH ROAD HAMPSTEAD, MD 21074				
CANINE COMPANIONS FOR INDEPENDENCE (NE REGION) 286 MIDDLE ISLAND ROAD MEDFORD, NY 11763	NONE	PC	GENERAL SUPPORT	500

CANINE COMPANIONS FOR INDEPENDENCE (NE REGION) 286 MIDDLE ISLAND ROAD MEDFORD, NY 11763	NONE	PC	GENERAL SUPPORT	500
CASEY CARES FOUNDATION 3918 VERO ROAD STE C	NONE	PC	GENERAL SUPPORT	500

MEDFORD, NY 11763				
CASEY CARES FOUNDATION 3918 VERO ROAD STE C BALTIMORE MD 21227	NONE	PC	GENERAL SUPPORT	500

80,000

CASEY CARES FOUNDATION	NONE	PC	GENERAL SUPPORT	
3918 VERO ROAD STE C				
BALTIMORE, MD 21227				

CASE CARES FOUNDATION	NONE	PC	GENERAL SUPPORT	i
3918 VERO ROAD STE C				
BALTIMORE, MD 21227				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHESAPEAKE BAY FOUNDATION NONE PC GENERAL SUPPORT 500 6 HERNDON AVENUE ANNAPOLIS.MD 21403

· · · · · · · · · · · · · · · · · · ·				
COCKEYSVILLE VOLUNTEER FIRE COMPANY PO BOX 344 COCKEYSVILLE, MD 21030	NONE	PC	GENERAL SUPPORT	1,000
				-

PO BOX 344 COCKEYSVILLE, MD 21030				
COMMUNITY CRISIS CENTER INC 725 MAIN STREET P O BOX 526 REISTERSTOWN, MD 21236	NONE	PC	GENERAL SUPPORT	500

Total .

80,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CBOHNIS & COLITIS ECHNIDATION OF NONE PC GENERAL SUPPORT 500

AMERICA NATL PROCESS CTR PO BOX 1245 ALBERT LEA, MN 56007	NONE		OLIVE SST SKT	360
CROMWELL VALLEY PARK COUNCIL 2002 CROMWELL BRIDGE RD PARKVILLE, MD 21234	NONE	PC	GENERAL SUPPORT	500

2002 CROMWELL BRIDGE RD PARKVILLE, MD 21234	NONE	PC	GENERAL SUPPORT	500
CYSTIC FIBROSIS FOUNDATION - MARYLAND CHAPTER 10626 YORK ROAD SUITE A	NONE	PC	GENERAL SUPPORT	500

2002 CROMWELL BRIDGE RD PARKVILLE, MD 21234				
CYSTIC FIBROSIS FOUNDATION - MARYLAND CHAPTER 10626 YORK ROAD SUITE A	NONE	PC	GENERAL SUPPORT	50

Total .

PARRVILLE, MD 21234				1
CYSTIC FIBROSIS FOUNDATION - MARYLAND CHAPTER 10626 YORK ROAD SUITE A COCKEYSVILLE, MD 21030	NONE	PC	GENERAL SUPPORT	500

За

80,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year DIRECT RELEIF - COVID-19 RELIEF NONE PC GENERAL SUPPORT 2,000

6100 WALLACE BECKNELL ROAD SANTA BARBARA, CA 93117				
FISHER HOUSE FOUNDATION 12300 TWINBROOK PARKWAY SUITE 410 ROCKVILLE, MD 20850	NONE	PC	GENERAL SUPPORT	500

12300 TWINBROOK PARKWAY SUITE 410 ROCKVILLE, MD 20850				
FOUNDATION FOR BALTIMORE COUNTY PUBLIC LIBRARY	NONE	PC	GENERAL SUPPORT	

410 ROCKVILLE, MD 20850				
FOUNDATION FOR BALTIMORE COUNTY PUBLIC LIBRARY	NONE	PC	GENERAL SUPPORT	5

ROCKVILLE, MD 20850				İ
FOUNDATION FOR BALTIMORE COUNTY PUBLIC LIBRARY 320 YORK ROAD	NONE	PC	GENERAL SUPPORT	500
FOWCON MD 24204		I		

FOUNDATION FOR BALTIMORE COUNTY	NONE	PC	GENERAL SUPPORT	500
PUBLIC LIBRARY				
320 YORK ROAD				
TOWSON, MD 21204				
	•			

TOWSON, MD 21204		
320 YORK ROAD		
FODLIC LIBRARI		

TOWSON, MD 21204			
Total	 	▶ 3a	80,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

	or substantial contributor			
a Paid during the year				
GBMC FOUNDATION 6701 N CHARLES STREET BALTIMORE, MD 21204	NONE	PC	GENERAL SUPPORT	500

B/(2/11/10/(2//118 2120)				
GILCHRIST HOSPICE CARE 11311 MCCORMICK ROAD SUITE 350 HUNT VALLEY, MD 21031	NONE	PC	GENERAL SUPPORT	5,000
GIRL SCOUTS OF CENTRAL MARYLAND	NONE	PC	GENERAL SUPPORT	500

HUNT VALLEY, MD 21031				
GIRL SCOUTS OF CENTRAL MARYLAND 4806 SETON DRIVE BALTIMORE, MD 21215	NONE	PC	GENERAL SUPPORT	500

HUNT VALLEY, MD 21031				
GIRL SCOUTS OF CENTRAL MARYLAND 4806 SETON DRIVE BALTIMORE, MD 21215	NONE	PC	GENERAL SUPPORT	500
Total			> 3a	80,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HAMDSTEAD VOLUNTEED EIDE NONE DC. GENERAL SUBBORT 500

COMPANY PO BOX 231 1341 N MAIN STREET HAMPSTEAD, MD 21074	NONE	rc .	GENERAL SUFFORT	300
HEREFORD HIGH SCHOOL PTSA DIRECT DONATION 17301 YORK ROAD PARKTON. MD 21120	NONE	PC	GENERAL SUPPORT	2,000

HEREFORD HIGH SCHOOL PTSA DIRECT DONATION 17301 YORK ROAD PARKTON, MD 21120	NONE	PC	GENERAL SUPPORT	2,000
HEREFORD VOLUNTEER AMBULANCE ASSOC PO BOX 262 MONKTON, MD 21111	NONE	PC	GENERAL SUPPORT	500

Total	80,000			
HEREFORD VOLUNTEER AMBULANCE ASSOC PO BOX 262 MONKTON, MD 21111	NONE	PC	GENERAL SUPPORT	500
17301 YORK ROAD PARKTON, MD 21120				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor.

	or substantial continuator			
a Paid during the year				
HEREFORD VOLUNTEER FIRE COMPANY 510 MONKTON ROAD MONKTON, MD 21111	NONE	PC	GENERAL SUPPORT	500

MONKTON, MD 21111				
HIRE HEROES USA 1360 UNION HILL RD BLDG 2 SUITE A ALPHARETTA, GA 30004	NONE	PC	GENERAL SUPPORT	500
HISPANIC FEDERATION	NONE	PC	GENERAL SUPPORT	1.000

1360 UNION HILL RD BLDG 2 SUITE A ALPHARETTA, GA 30004	inone		SENEROLE SON SIXI	300
HISPANIC FEDERATION 55 EXCHANGE PLACE 5TH FLOOR NEW YORK, NY 10005	NONE	PC	GENERAL SUPPORT	1,000

Total			▶ 3a	80,000
HISPANIC FEDERATION 55 EXCHANGE PLACE 5TH FLOOR NEW YORK, NY 10005	NONE	PC	GENERAL SUPPORT	1,000
ALPHARETTA, GA 30004				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HOPEWELL CANCER SUPPORT NONE PC GENERAL SUPPORT 500 PO BOX 755

BROOKLANDVILLE, MD 21022				
HOUSE OF RUTH MARYLAND 2201 ARGONNE DRIVE BALTIMORE, MD 21218	NONE	PC	GENERAL SUPPORT	500
INTREPID MUSEUM FOUNDATION - FALLEN HEROES FUND 1 INTREPID SQUARE W 46TH ST 12TH AVE	NONE	PC	GENERAL SUPPORT	500

BALTIMORE, MD 21218				<u> </u>
INTREPID MUSEUM FOUNDATION - FALLEN HEROES FUND 1 INTREPID SQUARE W 46TH ST 12TH AVE NEW YORK, NY 10036	NONE	PC	GENERAL SUPPORT	500

Total .

За

80,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year IRVINE NATURE CENTER NONE PC GENERAL SUPPORT 500 11201 GARRISON FOREST RD OWINGS MILLS, MD 21117 PC 500 JACKSONVILLE VOLUNTEER FIRE NONE GENERAL SUPPORT COMPANY

3500 SWEET AIR ROAD PHOENIX, MD 21131				
JUVENILE DIABETES RESEARCH FOUNDATION (JDRF) - GREATER CHESAPEAKE AND POTOM 891 ELKRIDGE LANDING ROAD SUITE 150 LINTHICUM, MD 21090	NONE	PC	GENERAL SUPPORT	1,000

▶ 3a

80,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year KENNEDY KRIEGER FOUNDATION NONE PC GENERAL SUPPORT 500 707 NORTH BROADWAY

BALITMORE, MD 21205				
KOMEN MARYLAND (SUSAN G KOMEN FOUNDATION) 303 INTERNATIONAL CIRCLE SUITE 390 HUNT VALLEY, MD 21030	NONE	PC	GENERAL SUPPORT	500
LADEW TOPIARY GARDENS	NONE	PC	GENERAL SUPPORT	2,000

303 INTERNATIONAL CIRCLE SUITE 390 HUNT VALLEY, MD 21030				
LADEW TOPIARY GARDENS 3535 JARRETTSVILLE PIKE MONKTON. MD 21111	NONE	PC	GENERAL SUPPORT	2,000

HUNT VALLEY, MD 21030				
LADEW TOPIARY GARDENS 3535 JARRETTSVILLE PIKE MONKTON, MD 21111	NONE	PC	GENERAL SUPPORT	2,000
Total			▶ 3a	80,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

	or substantial contributor			
a Paid during the year				
LIVING CLASSROOMS FOUNDATION 802 S CAROLINE STREET	NONE	PC	GENERAL SUPPORT	500

BALTIMORE, MD 21231				
LUNG CANCER RESEARCH FOUNDATION 155 EAST 55TH STREET STE 6H NEW YORK NY 10022	NONE	PC	GENERAL SUPPORT	1,000

DALITHORE, MD 21231				
LUNG CANCER RESEARCH FOUNDATION 155 EAST 55TH STREET STE 6H NEW YORK, NY 10022	NONE	PC	GENERAL SUPPORT	1,000
LUNGEVITY FOUNDATION 228 SOUTH WABASH AVE SUITE 700 CHICAGO IL 60604	NONE	PC	GENERAL SUPPORT	500

LUNGEVITY FOUNDATION 228 SOUTH WABASH AVE SUITE 700 CHICAGO, IL 60604 NONE PC GENERAL SUPPORT 500	NEW YORK, NY 10022				
	228 SOUTH WABASH AVE SUITE 700	NONE	PC	GENERAL SUPPORT	500

LUNGEVITY FOUNDATION 228 SOUTH WABASH AVE SUITE 700	NONE	PC	GENERAL SUPPORT	500
CHICAGO, IL 60604			N 2-	00.000
l Total			> 3a	l 80,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LUPUS FOUNDATION OF AMERICA NONE PC GENERAL SUPPORT 500 2121 K STREET NW SUITE 200 WASHINGTON, DC 20004

MARCH OF DIMES DONATION PROCESS CTR PO BOX 673667 MARIETTA, GA 30006	NONE	PC	GENERAL SUPPORT	500
MARYLAND FOOD BANK	NONE	PC	GENERAL SUPPORT	10.000

DONATION PROCESS CTR PO BOX 673667 MARIETTA, GA 30006				
MARYLAND FOOD BANK	NONE	PC	GENERAL SUPPORT	10,00

MARIETTA, GA 30006				
MARYLAND FOOD BANK 2200 HALETHORPE FARMS ROAD BALTIMORE MD 21227	NONE	PC	GENERAL SUPPORT	10,00

MARYLAND FOOD BANK 2200 HALETHORPE FARMS ROAD	NONE	PC	GENERAL SUPPORT	10,000
BALTIMORE, MD 21227				

За

80,000

MARYLAND FOOD BANK	NONE	PC	GENERAL SUPPORT	10,
2200 HALETHORPE FARMS ROAD				
BALTIMORE, MD 21227				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MARYLAND LINE VOLUNTEER FIRE NONE PC GENERAL SUPPORT 500

COMPANY				
21631 YORK ROAD				
MARYLAND LINE, MD 21105				
·				
MARYLAND PUBLIC TELEVISION	NONE	PC	GENERAL SUPPORT	500
LAATCE OMINICO MILLO DILVO				i

MARTLAND LINE, MD 21103				
MARYLAND PUBLIC TELEVISION 11767 OWINGS MILLS BLVD OWINGS MILLS, MD 21117	NONE	PC	GENERAL SUPPORT	500
MARYLAND SCIENCE CENTER 601 LIGHT STREET	NONE	PC	GENERAL SUPPORT	1,000

11767 OWINGS MILLS BLVD OWINGS MILLS, MD 21117				
MARYLAND SCIENCE CENTER 601 LIGHT STREET BALTIMORE, MD 21230	NONE	PC	GENERAL SUPPORT	1,000

MARYLAND SCIENCE CENTER 601 LIGHT STREET BALTIMORE, MD 21230	NONE	PC	GENERAL SUPPORT	1,000
Total			▶ 3a	80,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MARYLAND SPCA3300 FALLS ROAD NONE PC GENERAL SUPPORT 500

BALTIMORE, MD 21211				
MARYLAND ZOO IN BALTIMORE DRUID HILL PARK 1876 MANSION HOUSE DRIVE BALTIMORE, MD 21217	NONE	PC	GENERAL SUPPORT	1,000

HOUSE DRIVE BALTIMORE, MD 21217				
MEALS ON WHEELS OF CENTRAL MARYLAND 515 SOUTH HAVEN STREET BALTIMORE, MD 21224	NONE	PC	GENERAL SUPPORT	2,500

BALTIMORE, MD 21217				
MEALS ON WHEELS OF CENTRAL MARYLAND 515 SOUTH HAVEN STREET BALTIMORE, MD 21224	NONE	PC	GENERAL SUPPORT	2,500
Total			▶ 3a	80,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MICHAEL LEGY FOUNDATION FOR NONE DC CENERAL CURRORT EOO

PARKINSON'S RESEARCH DONATION PROCESSING PO BOX 5041 HAGERSTOWN, MD 21741	NONE	.	GENERAL SUPPORT	500
MOUNT WASHINGTON PEDIATRIC HOSPITAL	NONE	PC	GENERAL SUPPORT	500

HAGERSTOWN, MD 21741				
MOUNT WASHINGTON PEDIATRIC HOSPITAL 1708 WEST ROGERS AVENUE BALTIMORE, MD 21209	NONE	PC	GENERAL SUPPORT	500
MR HOLLAND'S OPUS FOUNDATION	NONE	PC	GENERAL SUPPORT	500

BALTIMORE, MD 21209				
MR HOLLAND'S OPUS FOUNDATION 4370 TUJUNGA AVENUE SUITE 330 STUDIO CITY, CA 91604	NONE	PC	GENERAL SUPPORT	500

80,000

MR HOLLAND'S OPUS FOUNDATION	NONE	PC	GENERAL SUPPORT	!
4370 TUJUNGA AVENUE SUITE 330				
STUDIO CITY, CA 91604				
		1		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ь. NIONE E00

MY NEIGHBORS FOUNDATION PO BOX 477 MONKTON, MD 21111	NONE	PC	GENERAL SUPPORT	500
NATIONAL AQUARIUM IN BALTIMORE 501 E PRATT STREET BALTIMORE, MD 21202	NONE	PC	GENERAL SUPPORT	2,000
NATIONAL KIDNEY FOUNDATION OF MARYLANDDELAWARE HEAVER PLAZA 1301 YORK ROAD SUITE	NONE	PC	GENERAL SUPPORT	500

501 E PRATT STREET BALTIMORE, MD 21202				_,,,,,
NATIONAL KIDNEY FOUNDATION OF MARYLANDDELAWARE HEAVER PLAZA 1301 YORK ROAD SUITE 209 LUTHERVILLE, MD 21093	NONE	PC	GENERAL SUPPORT	500
Total			▶ 3a	80,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATIONAL MULTIPLE SCLEROSIS NONE PC GENERAL SUPPORT 500 COCTETY

1800 M STREET NW SUITE B50 WASHINGTON, DC 20036				
NATIONAL PARK FOUNDATION GIFT PROCESSING PO BOX 17394 BALTIMORE ND 21298	NONE	PC	GENERAL SUPPORT	500

NATIONAL PARK FOUNDATION GIFT PROCESSING PO BOX 17394 BALTIMORE, MD 21298	NONE	PC	GENERAL SUPPORT	500
NATURE CONSERVANCY 425 BARLOW PLACE SUITE 100	NONE	PC	GENERAL SUPPORT	1,000

GIFT PROCESSING PO BOX 17394 BALTIMORE, MD 21298				
NATURE CONSERVANCY 425 BARLOW PLACE SUITE 100 BETHESDA, MD 20814	NONE	PC	GENERAL SUPPORT	1,000

,				
NATURE CONSERVANCY 425 BARLOW PLACE SUITE 100 BETHESDA, MD 20814	NONE	PC	GENERAL SUPPORT	1,000
Total			▶ 3a	80,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

OPERATION HOMEFRONT 1355 CENTRAL PKWY SOUTH STE 100 SAN ANTONIO, TX 78232	NONE	PC	GENERAL SUPPORT	500
OREGON RIDGE NATURE CENTER & PARK COUNCIL 13555 BEAVER DAM ROAD	NONE	PC	GENERAL SUPPORT	500

OREGON RIDGE NATURE CENTER & PARK COUNCIL 13555 BEAVER DAM ROAD COCKEYSVILLE, MD 21030	NONE	PC	GENERAL SUPPORT	50
DATHEINDERS FOR AUTISM	NONE	DC.	CENEDAL SUBBORT	50

13555 BEAVER DAM ROAD COCKEYSVILLE, MD 21030				
PATHFINDERS FOR AUTISM 235 SCHILLING CIRCLE STE 103	NONE	PC	GENERAL SUPPORT	500

COCKEYSVILLE, MD 21030				1
PATHFINDERS FOR AUTISM 235 SCHILLING CIRCLE STE 103 HUNT VALLEY, MD 21031	NONE	PC	GENERAL SUPPORT	500

80,000

PATHFINDERS FOR AUTISM	NONE	I PC	GENERAL SUPPORT	, 51
235 SCHILLING CIRCLE STE 103				1
HUNT VALLEY, MD 21031				İ

TATTI TREETS FOR ACTION	ITOITE	, .	CENTER OF TORY	1
235 SCHILLING CIRCLE STE 103				
HUNT VALLEY, MD 21031				
			•	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PROSTATE CANCER FOUNDATION NONE PC GENERAL SUPPORT 500 1250 FOURTH STREET SANTA MONICA, CA 90401

1	·				
1	RONALD MCDONALS HOUSE CHARITIES MARYLAND 1 AISQUITH STREET BALTIMORE, MD 21202	NONE	PC	GENERAL SUPPORT	500
	ST JUDE CHILDREN'S RESEARCH	NONE	PC	GENERAL SUPPORT	500

За

80,000

HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
STAR COMMUNITY INC	NONE	PC	GENERAL SUPPORT	500

13757 BROADFORDING CHURCH RD HAGERSTOWN, MD 21740	NONE	PC	GENERAL SUPPORT	500
TEAM RUBICON - COVID-19 RELIEF 6171 W CENTURY BLVD SUITE 310	NONE	PC	GENERAL SUPPORT	2,000

21.8101111,118 21710				
1 RUBICON - COVID-19 RELIEF . W CENTURY BLVD SUITE 310 ANGELES, CA 90045	NONE	PC	GENERAL SUPPORT	2,000
RETTE SYNDROME ASSOCIATION 0 BELL BOULEVARD	NONE	PC	GENERAL SUPPORT	500

6171 W CENTURY BLVD SUITE 310 LOS ANGELES, CA 90045				
TOURETTE SYNDROME ASSOCIATION 42-40 BELL BOULEVARD BAYSIDE, NY 11361	NONE	PC	GENERAL SUPPORT	500

,				
TOURETTE SYNDROME ASSOCIATION 42-40 BELL BOULEVARD BAYSIDE, NY 11361	NONE	PC	GENERAL SUPPORT	500
Total			▶ 3a	80,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ULMAN FOUNDATION NONE PC GENERAL SUPPORT 500 1215 EAST FORT AVENUE STE 104

BALTIMORE, MD 21230				
UNIVERSITY OF MARYLAND REHABILITATION & ORTHOPEADIC INST 110 S PACA STREET 9TH FLOOR BALTIMORE, MD 21201	NONE	PC	GENERAL SUPPORT	500
UPPERCO VOLUNTEER FIRE COMPANY 5415 ARCADIA AVENUE PO BOX 7	NONE	PC	GENERAL SUPPORT	500

80,000

UPPERCO, MD 21155

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

USODEPT WS PO BOX 96860 WASHINGTON, DC 20077	NONE	PC	GENERAL SUPPORT	500
WALTERS ART MUSEUM DEVEL OFFICE 600 N CHARLES ST BALTIMORE, MD 21201	NONE	PC	GENERAL SUPPORT	500
WORLD CENTRAL KITCHEN - COVID-19 RELIEF	NONE	PC	GENERAL SUPPORT	5,000

BALTIMORE, MD 21201				
WORLD CENTRAL KITCHEN - COVID-19 RELIEF 1875 CONNECTICUT AVE NW 10TH FLOOR WASHINGTON, DC 20009	NONE	PC	GENERAL SUPPORT	5,000
Total			▶ 3a	80,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of

recinient

80,000

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
WORLD WILDLIFE FUND	NONE	PC	GENERAL SUPPORT	500

WORLD WILDLIFE FUND	NONE	PC	GENERAL SUPPORT	
1250 24TH ST NW				
WASHINGTON, DC 20090				

any foundation manager

WORLD WILDLIFE FUND	NONE	PC	GENERAL SUPPORT	500
1250 24TH ST NW WASHINGTON, DC 20090				
W/15/11/16/16/17, DC 20050				

efile GRAPHIC print - DO NOT	PROCESS	As Filed Da	ata -		DLN: 93491074006101	
TY 2020 Accounting F	ees Sche	edule				
Name: DAVID W BUCK FAMILY FOUNDATION INC EIN: 52-2275104						
Category	Amo	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING FEES		1,030	515		515	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491074006101
TY 2020 Investments Corpora	te Stock Sched	ule

468,861

6,142

137,339

10,055

Name: DAVID W BUCK FAMILY FOUNDATION INC

EIN: 52-2275104

MICROSOFT EXXON MOBIL

Investments Corporation Stock Schedule				
Name of Stock	End of Year Book End of Year Fair Value Market Value			
INTEL	28,743 62,275			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -			DLN: 93491074006101		
TY 2020 Substantial Contributors Schedule						
	DAVID W BUC 52-2275104	K FAMILY	FOUNDATION INC			
Name			Add	ress		
DAVID W BUCK			106 ENGLISH RUN CIRCLE SPARKS, MD 21152			
THE DAVID & ELLEN BUCK LLC			106 ENGLISH RUN CIRCLE SPARKS, MD 21152			
ELLEN C BUCK			106 ENGLISH RUN CIRCLE SPARKS, MD 21152			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	D	LN: 93491074006101
TY 2020 Taxes Schedule				
Name: DAVID W BUCK FAMILY FOUNDATION INC				
EIN: 52-2275104				
Taxes Schedule		,		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2019 FEDERAL BALANCE DUE	52	0		0
2020 FEDERAL ESTIMATE	1,400	0		0